BEST AVAILABLE COPY 300048

FORM D

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

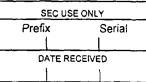
FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION



OMB Approval

OMB Number 3235-0076 Expires: November 30, 2001 Estimated average burden hours per response 16.00



Name of Offering (check if this is an amendment and name has changed, and indicate change.)	
Filing Under (Check box(es) that apply): X Rule 504 Rule 505 Rule 506	☐ Section 4(6) ☐ ULOE
Type of Filing: X New Filing Amendment	
A. BASIC IDENTIFICATION DAT	A ROEVELVED
Enter the information requested about the issuer	
Name of Issuer (check if this is an amendment and name has changed, and indicate change.) DYNAMIC RESOURCE, INC.	JUL 11 4 2004
Address of Executive Offices (Number and Street, City, State, Zip Code) 7270 N.W. 12 TH STREET, SUITE 380, MIAMI, FLORIDA 33126	Telephone Number (including Area Godo) 305-715-0054
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (including Area Code)
Brief Description of Business LENDING SERVICES	PROCESSFI
Type of Business Organization X corporation	other (please specify): limited liability company THOSE
Actual or Estimated Date of Incorporation or Organization: Month	Year 0 4 X Actual ☐ Estimated

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. Or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (2-99)

A. BASIC	IDENTIFICA	ATION DATA								
 2. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. 										
	al Owner X	Executive Officer	X	Director		General and/or Managing Partner				
Full Name (Last name first, if individual) FERNANDEZ, CARLOS Business or Residence Address (Number and Street, City, State 7270 N.W. 12 TH STREET, SUITE 380, MIAMI, FLORIDA										
	ial Owner	Executive Officer	X	Director		General and/or Managing Partner				
Full Name (Last name first, if individual) FERNANDEZ, LOURDES			:	·						
Business or Residence Address (Number and Street, City, State 7270 N.W. 12 TH STREET, SUITE 380, MIAMI, FLORIDA				- 1	· ·					
Check Box(es) that Apply: Promoter Benefici	ial Owner	Executive Officer	X	Director		General and/or Managing Partner				
Full Name (Last name first, if individual) RODRIGUEZ, FRANK				% 2						
Business or Residence Address (Number and Street, City, State 7270 N.W. 12 TH STREET, SUITE 380, MIAMI, FLORIDA					1 - 1					
Check Box(es) that Apply: Promoter Benefici	ial Owner	Executive Officer		Director		General and/or Managing Partner				
Full Name (Last name first, if individual)										
Business or Residence Address (Number and Street, City, State	, Zip Code)									
Check Box(es) that Apply: Promoter Benefici	ial Owner	Executive Officer		Director		General and/or Managing Partner				
Full Name (Last name first, if individual)										
Business or Residence Address (Number and Street, City, State	e, Zip Code)									
Check Box(es) that Apply: Promoter Benefici	ial Owner	Executive Officer		Director		General and/or Managing Partner				
Full Name (Last name first, if individual)										
Business or Residence Address (Number and Street, City, State	e, Zip Code)									
Check Box(es) that Apply: Promoter Benefici	ial Owner 🔲	Executive Officer		Director		General and/or Managing Partner				
Full Name (Last name first, if individual)	-					-				
Business or Residence Address (Number and Street, City, State	e, Zip Code)									

A. BASIC IDENTIFICATION DATA										
Check Box(es) that Apply: Promoter		Beneficial Owner		Executive Officer		Director		General and/or Managing Partne		
full Name (Last name first, if individual)										
Business or Residence Address (Number and S	treet, (City, State, Zip Code)					•			
							•			
								•		
				•						

(Use blank sheet or copy and use additional copies of this sheet, as necessary)

					B. I	NFORM	MATIO	N ABO	UT OF	FERIN	IG				
1.	Has the issu	aer sold o	r does the	issuer in	tend to se	ell, to non	-accredit	ed investo	ors in this	offering	?			Yes	No
	. Answer also in Appendix, Column 2, if filing under ULOE.											X			
		•													
What is the minimum investment that will be accepted from any individual?										\$ 100	000				
۲.	What is the	TITITI WA		OIII IIIai v	vill be ap	oopica ne	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	o.,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,				÷			
														Yes □	No X
3.	Does the of	fering per	rmit joint	ownershi	p of a sir	igle unit?									
4.	Enter the				•				•	_			, , ,		
	commission person to b														
	states, list	the name	of the br	oker or o	lealer. It	f more th	an five (5) person	s to be li						
	broker or d	ealer, you	may set	forth the	informati ———	on for tha	it broker	or dealer	only.						
	Name (Last	name fire	st, if indiv	vidual)								•			
NON		· · · · · · · · · · · · · · · · · · ·	1d () T		d Campan (City Ctra	- 71- C-	4-1							-
Busi	ness or Res	idence Ac	iaress (ivi	umber an	a Street, t	City, Stati	e, Zip Co	ue)							
Nam	e of Associ	ated Brok	er or Dea	ler					·				· · · ·		
	s in Which													Il States	
(Cne	ck "All Sta] [AK]	[AZ]	eck indiv [AR]	(CA)	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	(HI)	[ID]	А	.ll States	
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(RI		[SD]	[TN]	[TX]	(UT)	(VT)	[AV]	[WA]	[WV]	[WI]	[WY]	[PR]	,		
_	Name (Last		st, if indi	vidual)											
Busi	ness or Res	idence Ac	Idress (N	umber an	d Street, (City, Stat	e, Zip Co	de)							
Nom	e of Associ	ated Brok	er or Dec	lar											
Ivaii	ic of Associ	aled Diok													
	s in Which														
-	ck "All Sta	tes" or ch	eck indiv	idual Stat	es)	•••••					•••••		A	II States	
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TM)		[NV]	[NH]	[NJ]	(NM)	[NY]	[NC]	(ND)	[HO]	[OK]	[OR]	[PA]			
Full] [SC] Name (Last	[SD]	st. if indi	(TX) vidual)	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]			
1 4	174110 (245)	, many in	ou,	(14441)											
Busi	ness or Res	idence Ac	dress (N	umber an	d Street,	City, Stat	e, Zip Co	de)							
	 														
Nam	e of Associ	ated Brok	er or Dea	ıler											
State	es in Which	Percon I	icted Hac	Solicited	or Intend	is to Solid	it Purcha	cerc							
	ck "All Sta								••••		• • • • • • • • • • • • • • • • • • • •		A	II States	
(AL		[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]			
[IL		[IA]	[KS]	[KY]	[LA]	[AM]	[MD]	[ME]	(MI)	[MN]	[MS]	[MO]			
[MT		[NV]	[NH]	[NJ]	[MM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]			
[RI		[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]			

(Use blank sheet or copy and use additional copies of this sheet, as necessary)

Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the column below the amounts of the securities offered for exchange and already exchanged. Amount Aggregate Type of Security Offering Price Already Sold Debt Equity 1,000,000 X Common ☐ Preferred Convertible Securities (including warrants) Partnership Interests Other (Specify: _ 1,000,000 Total Answer also in Appendix, Column 3, if filing under ULOE Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero." Aggregate Number Dollar Amount of Purchases Investors Accredited Investors Non-accredited Investors 0 0 Total (for filings under Rule 504 only) Answer also in Appendix, Column 3, if filing under ULOE 3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1. Dollar Type of Type of offering Amount Sold Security Rule 505 Regulation A Rule 504 NONE NONE Total a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. 250 Transfer Agent's Fee Printing and Engraving Costs Legal Fees 2,500 Accounting Fees Engineering Fees Sales Commissions (Specify finder's fees separately 0 0 Other Expenses (identify) 2,750 Total

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

		(DED OF INTERM	ODO EMPENO		D 110D 0D DD 00D		
	C. OFFERING PRICE, NUM	IBER OF INVEST	ORS, EXPENSE	SAN	D USE OF PROCE	EDS	
	b. Enter the difference between the aggregate Question I and total expenses furnished in resthe "adjusted gross proceeds to the issuer."					\$	997,250
5.	Indicate below the amount of the adjusted gro used for each of the purposes shown. If the a estimate and check the box to the left of the equal the adjusted gross proceeds to the issue above.	mount for any purpose estimate. The total of t	is not known, furnish he payments listed n	an nust			
	.				Payments to Officers, Directors, & Affiliates		Payments to Others
	Salaries and fees				S \square	ç	· · · =
	Purchase of real estate				ş	\$	-
	Purchase, rental or leasing and installation	of machinery and equir	ment		\$	ς.	
	Construction or leasing of plant buildings			П	s	s -	
	Acquisition of other businesses (include offering that may be used in exchange pursuant to a merger				s	\$	
	Repayment of indebtedness				\$ □	\$	
	Working capital		•		\$	\$	997,250
	Other (specify)				s	\$	
	Column Totals					\$	997,250
	Total Payments Listed (column totals adde	ed)			□ \$ <u>997,25</u>	0	_
		D. FEDERAL	SIGNATURE				
sig	he issuer has duly caused this notice to be signed gnature constitutes an undertaking by the issuer to formation furnished by the issuer to any non-accre	furnish to the U.S. Se	curities and Exchang	e Comn	nission, upon written requ		
Iss	suer (Print or Type)	Signature			Date		
D	YNAMIC RESOURCE, INC.				July 13, 2004		
	ame of Signer (Print or Type)	Title of Signer (Prin	or Type)				
CA	ARLOS FERNANDEZ	PRESIDENT					·

	See Appendix, Column 5, for state response. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on For (17 CFR 239.500) at such times as required by state law. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuefferees.				
1.		ently subject to any of th	e disqualification provisions of	Yes	No <u>X</u>
	See Appendix, Column 5, f	or state response.			
2.	•	administrator of any sta	te in which this notice is filed, a notice	on Form I) .
3.	,	administrators, upon wri	tten request, information furnished by	the issuer	to
4.	Offering Exemption (ULOE) of the state in which this notice is f	iled and understands tha			
	he issuer has read this notification and knows the contents to be true uly authorized person.	and has duly caused thi	s notice to be signed on its behalf by th	ne undersig	ned
Iss	ssuer (Print or Type) Signature		Date		
DY	DYNAMIC RESOURCE, INC.		July 13, 2004		
Na	lame of Signer (Print or Type) Title of Signe	r (Print or Type)			

PRESIDENT

Instruction:

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX

1		2	3		5						
		•							•		
					Disqualification under State						
	Intend 1	to sell to			·						
	non-acc	credited	Type of security and			_		ULOE (if yes, attach			
		tors in ate	aggregate offering price offered in state	а	Type of inve mount purcha	stor and sed in State		explana waiver g			
		-Item 1)	(Part C-Item 1)		(Part C-It	tem 2)		(Part E	Item 1)		
				Number of Accredited		Number of Nonaccredited	Amou				
State	Yes	No		Investors	Amount	Investors	nt	Yes	No		
AL											
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AR											
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APPENDIX

1	2 3				4				5	
	non-ac inves St	to sell to credited tors in ate -Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	e of security and regate offering Type of investor and amount purchased in State rart C-Item 1) (Part C-Item 2)						
				Number of Accredited		Number of Nonaccredited	Amou			
State	Yes	No		Investors	Amount	Investors	nt	Yes	No	
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